

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Michael Felice Interiors LLC

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names
DBA Michael Felice Interiors Limited Liability Company
DBA Michael Felice Interiors
DBA Hunter Douglas Design Gallery by Michael Felice Interiors

3. Debtor's federal Employer Identification Number (EIN) 27-4180557

4. Debtor's address
Principal place of business
318 Franklin Avenue
Wyckoff, NJ 07481
Number, Street, City, State & ZIP Code
Bergen
County
Mailing address, if different from principal place of business
P.O. Box, Number, Street, City, State & ZIP Code
Location of principal assets, if different from principal place of business
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.michaelfeliceinteriors.com

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☒ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 30, 2020**
MM / DD / YYYY

X /s/ Michael J. Felice

Signature of authorized representative of debtor

Michael J. Felice

Printed name

Title **Member**

18. Signature of attorney

X /s/ David L. Stevens

Signature of attorney for debtor

Date **January 30, 2020**

MM / DD / YYYY

David L. Stevens 034422007 NJ

Printed name

Scura, Wigfield, Heyer, Stevens & Cammarota, LLP

Firm name

1599 Hamburg Turnpike

Wayne, NJ 07470

Number, Street, City, State & ZIP Code

Contact phone **973-696-8391**

Email address **ecfbkfilings@scuramealey.com**

034422007 NJ NJ

Bar number and State

Fill in this information to identify the case:

Debtor name Michael Felice Interiors LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 30, 2020

X /s/ Michael J. Felice

Signature of individual signing on behalf of debtor

Michael J. Felice

Printed name

Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name	Michael Felice Interiors LLC
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY
Case number (if known):	

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
American Express Attn: President / C.E.O. / Responsible Agent 200 Vesey Street New York, NY 10285-3106		Credit card purchases				\$79,146.00
American Express Attn: President / C.E.O. / Responsible Agent 200 Vesey Street New York, NY 10285-3106		Credit card purchases				\$60,723.54
Bank Of America Attn: President / C.E.O. / Responsible Agent P.O. Box 15796 Wilmington, DE 19886		Credit card				\$19,850.48
Biehl & Biehl Inc - Attn: Achris Goldman c/o Norh Jersey Media 325 E. Fullerton Avenue Carol Stream, IL 60188		Trade debt				\$50,000.00
Capital One Attn: President / C.E.O. / Responsible Agent P.O. Box 6492 Carol Stream, IL 60197		Credit card				\$13,737.49

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
CK Electronics Attn: President / C.E.O. / Responsible Agent 10 Storrs Court Mahwah, NJ 07430		Trade debt				\$45,000.00
Discover Attn: President / C.E.O. / Responsible Agent P.O. Box 6105 Carol Stream, IL 60197		Credit card				\$17,344.36
Discover Financial Attn: President / C.E.O. / Responsible Agent 12 Reads Way New Castle, DE 19720		Credit card				\$18,000.00
GTR Source / Empire Attn: President / C.E.O. / Responsible Agent 2361 Nostrand Avenue, Suite 501 Brooklyn, NY 11210		All real property except vehicle.	Disputed	\$254,830.00	\$61,074.42	\$193,755.58
Heartland Payment Systems Attn: President / C.E.O. / Responsible Agent 3932 S. Boulevard Street Edmond, OK 73003		Credit card processing provider				\$36,000.00
Hunter Douglas Attn: President / C.E.O. / Responsible Agent 1 Blue Hill Plaza, 21st Fl. Pearl River, NY 10965		Trade debt				\$657,000.00
Jacqueline & Mike Kelly 723 6th Street River Edge, NJ 07661		Money loaned				\$155,000.00

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Joe Donaway Wallcovering Installation Attn: President / C.E.O. / Responsible Agent 38 Dogwood Road Boonton, NJ 07005		Trade debt				\$18,000.00
Marlene & William Koenig 28 Pascack Road Park Ridge, NJ 07656		Money loaned				\$25,000.00
Par Funding / Complete Business Solution Attn: President / C.E.O. / Responsible Agent 2000 PGA Blvd., Suite 440 North Palm Beach, FL 33408		All real property except vehicle.		\$455,147.65	\$61,074.42	\$394,073.23
PayPal Attn: President / C.E.O. / Responsible Agent 3505 Silver Side Road, Suite 200 Wilmington, DE 19810		Loan Agreement				\$30,000.00
Phillip Jeffries 180 Passaic Avenue Fairfield, NJ 07004		Trade debt				\$20,338.10
Pioneer Credit Recovery c/o NJ Division of Taxation Attn: Arthur Crichlow P.O. Box 1009 Moorestown, NJ 08057		Sales Tax				\$73,677.46
Pollio Plumbing Attn: President / C.E.O. / Responsible Agent P.O. Box 445 Dumont, NJ 07628		Sub-contractor				\$15,000.00

Debtor **Michael Felice Interiors LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Wyckoff Associates Attn: President / C.E.O. / Responsible Agent 365 Franklin Avenue Wyckoff, NJ 07481		Lease	Subject to Setoff			\$38,921.50

Fill in this information to identify the case:

Debtor name **Michael Felice Interiors LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ 97,524.42
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ 97,524.42

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 779,477.65
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 95,665.46
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 1,425,397.80
4. Total liabilities	
Lines 2 + 3a + 3b	\$ 2,300,540.91

Fill in this information to identify the case:Debtor name Michael Felice Interiors LLCUnited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Bank of AmericaChecking\$1,622.473.2. TD BankChecking\$1,851.95**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$3,474.42**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Security deposit for 160N. NJ-17, Paramus, New Jersey 07652.\$33,600.007.2. Secuirty deposit for 318 Franklin Avenue, Wyckoff, NJ 07481.\$21,000.00

Debtor Michael Felice Interiors LLC Case number (If known) _____
Name

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$54,600.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Desk, chairs, etc.	\$1,000.00		\$1,000.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Printer, Computer, Phone, Software for both store locations.	\$2,000.00		\$2,000.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

Debtor Michael Felice Interiors LLC Case number (If known) _____
Name

43. **Total of Part 7.** \$3,000.00
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. <u>2018 BMW 540</u>	<u>\$36,450.00</u>	<u>Expert</u>	<u>\$36,450.00</u>

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.** \$36,450.00
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Debtor Michael Felice Interiors LLC Case number (If known) _____
Name

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor Michael Felice Interiors LLC Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$3,474.42	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$54,600.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$3,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$36,450.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$97,524.42	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$97,524.42

Fill in this information to identify the case:

Debtor name **Michael Felice Interiors LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Blue Vine <small>Creditor's Name</small> Attn: President / C.E.O. / Responsible Agent 401 Warren Street Redwood City, CA 94063 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All real property except the vehicle. Describe the lien UCC 51833392 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,000.00	\$61,074.42

2.2	CHTD Company <small>Creditor's Name</small> P.O Box 2576 Springfield, IL 62708 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All real property except vehicle. Describe the lien UCC 53481993 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$0.00	\$61,074.42
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Debtor **Michael Felice Interiors LLC** Case number (if know) _____

Name

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

2.3 GTR Source / Empire

Creditor's Name

Attn: President / C.E.O. / Responsible Agent
2361 Nostrand Avenue, Suite 501
Brooklyn, NY 11210

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All real property except vehicle.

\$254,830.00

\$61,074.42

Describe the lien

Unperfected contract lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

2.4 Kabbage

Creditor's Name

Attn: President / C.E.O. / Responsible Agent
925 B Peachtree Street, Suite 1688
Atlanta, GA 30309

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All real property except vehicle.

\$11,500.00

\$61,074.42

Describe the lien

UCC 53575382

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.5 Knight Capital

Describe debtor's property that is subject to a lien

\$25,000.00

\$61,074.42

Debtor Michael Felice Interiors LLC <small>Name</small>	Case number (if know) _____
Creditor's Name Attn: President / C.E.O. / Responsible Agent 9 East Loockerman Street, Suite 202-543 Dover, DE 19901	All real property except vehicle <hr/>
<small>Creditor's mailing address</small>	Describe the lien UCC 53330752 / Merchant advance <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
<small>Creditor's email address, if known</small>	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date debt was incurred	
Last 4 digits of account number	
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	

2.6	On Deck <small>Creditor's Name</small> Attn: President / C.E.O. / Responsible Agent 901 North Stuart Street Arlington, VA 22203	Describe debtor's property that is subject to a lien All real property except vehicle. <hr/>	\$30,000.00	\$61,074.42
	<small>Creditor's mailing address</small>	Describe the lien UCC 51112936 <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<small>Creditor's email address, if known</small>	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date debt was incurred			
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.			

2.7	Par Funding / Complete Business Solution <small>Creditor's Name</small> Attn: President / C.E.O. / Responsible Agent 2000 PGA Blvd., Suite 440 North Palm Beach, FL 33408	Describe debtor's property that is subject to a lien All real property except vehicle. <hr/>	\$455,147.65	\$61,074.42
	<small>Creditor's mailing address</small>	Describe the lien UCC 52996542 / Merchant advance		

Debtor Michael Felice Interiors LLC Name <hr/> Creditor's email address, if known <hr/> Date debt was incurred <hr/> Last 4 digits of account number <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <hr/>	Case number (if know) _____ <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/>
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$779,477.65

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
C T Corporation System 330 N Brand Blvd, Suite 700 Attn: SPRS Glendale, CA 91203	Line <u>2.2</u>	
Complete Group Solutions Group, INC. 325 Cherry Street Philadelphia, PA 19106	Line <u>2.7</u>	
Complete Group Solutions Group, INC. Attn: President / C.E.O. / Responsible Agent 22 N. 3rd Street Philadelphia, PA 19106	Line <u>2.7</u>	
John Hartley, Esq Brian H. Smith, Esq. c/o Complete Business Solutions Group 20 N. 3rd Street Philadelphia, PA 19106	Line <u>2.7</u>	
Norman M. Valz, Esq. 205 Arch Street, 2nd Fl. Philadelphia, PA 19106	Line <u>2.7</u>	
Sirlin Lesser & Benson, P.C. Attn: Jon C. Sirlin, Esq. c/o TD Bank 123 South Broad Street, Suite 2100 Philadelphia, PA 19109	Line <u>2.7</u>	

Fill in this information to identify the case:

Debtor name **Michael Felice Interiors LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Alexa Houlis 37 Fremont Avenue Nanuet, NY 10954</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unpaid wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$752.00	\$752.00
2.2	<p>Priority creditor's name and mailing address</p> <p>Barbara Benson 623 Pawnee Lane Franklin Lakes, NJ 07417</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Unpaid wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$5,192.00	\$5,192.00

Debtor	Michael Felice Interiors LLC Name	Case number (if known)
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2.3	Priority creditor's name and mailing address Elizabeth Kane 8 Romary Court Glen Rock, NJ 07452	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,954.00	\$3,954.00
Date or dates debt was incurred		Basis for the claim: Unpaid wages		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Elyce Berenzweig 28 Hazy Gate Lane Franklin Lakes, NJ 07417	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$890.00	\$890.00
Date or dates debt was incurred		Basis for the claim: Unpaid wages		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Janette Casse 20 Hill Street Midland Park, NJ 07432	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,228.00	\$9,228.00
Date or dates debt was incurred		Basis for the claim: Unpaid wages		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Michelle Griffith 159 S. Highwood Avenue Glen Rock, NJ 07452	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,192.00	\$1,192.00
Date or dates debt was incurred		Basis for the claim: Unpaid wages		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Michael Felice Interiors LLC Name	Case number (if known)
2.7	Priority creditor's name and mailing address Olivia Janovic 51 Hering Road Montvale, NJ 07645	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unpaid wages
	Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	
2.8	Priority creditor's name and mailing address Pioneer Credit Recovery c/o NJ Division of Taxation Attn: Arthur Crichlow P.O. Box 1009 Moorestown, NJ 08057	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Sales Tax
	Date or dates debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		<div style="background-color: #f2f2f2; padding: 2px; display: inline-block;">Amount of claim</div>
3.1	Nonpriority creditor's name and mailing address 17 North Associates/Gabrellian Associate Attn: President / C.E.O. / Responsible Agent 95 NJ-17 South Paramus, NJ 07652	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u>
	Date(s) debt was incurred	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
	Last 4 digits of account number	
3.2	Nonpriority creditor's name and mailing address American Express Attn: President / C.E.O. / Responsible Agent 200 Vesey Street New York, NY 10285-3106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u>
	Date(s) debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number	
3.3	Nonpriority creditor's name and mailing address American Express Attn: President / C.E.O. / Responsible Agent 200 Vesey Street New York, NY 10285-3106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u>
	Date(s) debt was incurred	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number	

Debtor	Michael Felice Interiors LLC Name	Case number (if known)
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3.4	Nonpriority creditor's name and mailing address Bank Of America Attn: President / C.E.O. / Responsible Agent P.O. Box 15019 Wilmington, DE 19886 Date(s) debt was incurred ____ Last 4 digits of account number 4540	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,207.21
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3.5	Nonpriority creditor's name and mailing address Bank Of America Attn: President / C.E.O. / Responsible Agent P.O. Box 15796 Wilmington, DE 19886 Date(s) debt was incurred ____ Last 4 digits of account number 9609	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,850.48
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3.6	Nonpriority creditor's name and mailing address Biehl & Biehl Inc - Attn: Achris Goldman c/o Norh Jersey Media 325 E. Fullerton Avenue Carol Stream, IL 60188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,000.00
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3.7	Nonpriority creditor's name and mailing address Buchanan Ingersoll Rooney Attn: Michael D. Hall c/o Install Focus 550 Broad Street, Suite 810 Newark, NJ 07102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,499.38
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3.8	Nonpriority creditor's name and mailing address Capital One Attn: President / C.E.O. / Responsible Agent P.O. Box 6492 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number 7732	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,737.49
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3.9	Nonpriority creditor's name and mailing address Carole Fabrics Attn: President / C.E.O. / Responsible Agent P.O. Box 1436 Augusta, GA 30903 Date(s) debt was incurred ____ Last 4 digits of account number 5000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$493.97
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Debtor	Michael Felice Interiors LLC Name	Case number (if known) _____
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3.10	Nonpriority creditor's name and mailing address Cirino Landscaping Attn: President / C.E.O. / Responsible Agent 440 West Main Street Wyckoff, NJ 07481 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,134.88 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Accounts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address CK Electronics Attn: President / C.E.O. / Responsible Agent 10 Storrs Court Mahwah, NJ 07430 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address Cowtan & Tout Attn: President / C.E.O. / Responsible Agent 205 Hudson Street, 6th Floor New York, NY 10013 Date(s) debt was incurred _____ Last 4 digits of account number <u>5113</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$268.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address Currey & Company Attn: President / C.E.O. / Responsible Agent 50 Best Friend Road Atlanta, GA 30340 Date(s) debt was incurred _____ Last 4 digits of account number <u>Felice</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,933.67 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address Design NJ Attn: President / C.E.O. / Responsible Agent 328 Newman Springs Road, Suite 11 Red Bank, NJ 07701 Date(s) debt was incurred _____ Last 4 digits of account number <u>61MD</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$135.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Magazine Subscription</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address DexYP Attn: President / C.E.O. / Responsible Agent P.O. Box 619009, DFW Airport Dallas, TX 75261 Date(s) debt was incurred _____ Last 4 digits of account number <u>4802</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$211.64 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Marketing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Michael Felice Interiors LLC	Case number (if known)	
3.16	Nonpriority creditor's name and mailing address Discover Attn: President / C.E.O. / Responsible Agent P.O. Box 6105 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number 2291	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,344.36
3.17	Nonpriority creditor's name and mailing address Discover Financial Attn: President / C.E.O. / Responsible Agent 12 Reads Way New Castle, DE 19720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,000.00
3.18	Nonpriority creditor's name and mailing address Fairfield Chairs Attn: President / C.E.O. / Responsible Agent P.O. Box 890081 Charlotte, NC 28289 Date(s) debt was incurred ____ Last 4 digits of account number 0295	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,192.16
3.19	Nonpriority creditor's name and mailing address Fine Line Delivery Attn: President / C.E.O. / Responsible Agent 27 Utter Avenue, Suite D Hawthorne, NJ 07506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,955.00
3.20	Nonpriority creditor's name and mailing address First Data Global Leasing Attn: President / C.E.O. / Responsible Agent P.O. Box 173845 Denver, CO 80217 Date(s) debt was incurred ____ Last 4 digits of account number 9600	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card machine</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$396.02
3.21	Nonpriority creditor's name and mailing address Franklin Funding Group LLC Attn: President / C.E.O. / Responsible Agent 1425 37th Street Brooklyn, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Michael Felice Interiors LLC Name _____	Case number (if known) _____
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3.22	Nonpriority creditor's name and mailing address Hallman Furniture 265 Wittenburg Road Taylorsville, NC 28681 Date(s) debt was incurred ____ Last 4 digits of account number <u>Michael Felice Inter</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,190.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Hanson Homes Attn: President / C.E.O. / Responsible Agent 1 Willow Court Park Ridge, NJ 07656 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sub-contractor service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address Heartland Payment Systems Attn: President / C.E.O. / Responsible Agent 3932 S. Boulevard Street Edmond, OK 73003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card processing provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address Hooker Attn: President / C.E.O. / Responsible Agent 400 Commonwealth, Blvd., E Martinsville, VA 24112 Date(s) debt was incurred ____ Last 4 digits of account number <u>3012</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,036.97 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address Houles Attn: President / C.E.O. / Responsible Agent 979 Thirs Avenue, Suite 919 New York, NY 10022 Date(s) debt was incurred ____ Last 4 digits of account number <u>0248</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,227.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address Hunter Douglas Attn: President / C.E.O. / Responsible Agent 1 Blue Hill Plaza, 21st Fl. Pearl River, NY 10965 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$657,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Michael Felice Interiors LLC Name	Case number (if known) _____
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3.28	Nonpriority creditor's name and mailing address Influx Capital LLC Attn: President / C.E.O. / Responsible Agent 32 Court Street # 205 Brooklyn, NY 11201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Merchant advance.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.29	Nonpriority creditor's name and mailing address Jacqueline & Mike Kelly 723 6th Street River Edge, NJ 07661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Money loaned</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$155,000.00
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3.30	Nonpriority creditor's name and mailing address JF Fabric Attn: President / C.E.O. / Responsible Agent P.O. Box 888, 6000 Main Street Tonawanda, NY 14151 Date(s) debt was incurred _____ Last 4 digits of account number <u>2277</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,183.37
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3.31	Nonpriority creditor's name and mailing address Joe Donaway Wallcovering Installation Attn: President / C.E.O. / Responsible Agent 38 Dogwood Road Boonton, NJ 07005 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,000.00
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3.32	Nonpriority creditor's name and mailing address John Richard 306 Eastman Greenwood, MS 38930 Date(s) debt was incurred _____ Last 4 digits of account number <u>LIC1</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,921.00
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3.33	Nonpriority creditor's name and mailing address Kravet Attn: President / C.E.O. / Responsible Agent P.O. Box 9413 New York, NY 10087 Date(s) debt was incurred _____ Last 4 digits of account number <u>4084</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,484.81
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3.34	Nonpriority creditor's name and mailing address Levy Diamond Bello & Associates c/o Fabricut P.O. Box 352 Milford, CT 06460 Date(s) debt was incurred _____ Last 4 digits of account number <u>1472</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,075.61
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Debtor	Michael Felice Interiors LLC Name	Case number (if known) _____
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3.35	Nonpriority creditor's name and mailing address Loren Ferraro 666 Godwin Avenue, Suite 210 Midland Park, NJ 07432 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,650.00
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3.36	Nonpriority creditor's name and mailing address Lyon Collection Services c/o Saloom 7924 West Sahara Avenue Las Vegas, NV 89117 Date(s) debt was incurred _____ Last 4 digits of account number <u>4798</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,297.00
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3.37	Nonpriority creditor's name and mailing address Marlene & William Koenig 28 Pascack Road Park Ridge, NJ 07656 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Money loaned</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
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3.38	Nonpriority creditor's name and mailing address Marshall Stokols Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sub-contractor service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.39	Nonpriority creditor's name and mailing address Merchant Alarm Systems Attn: President / C.E.O. / Responsible Agent 203 Paterson Avenue Wallington, NJ 07057 Date(s) debt was incurred _____ Last 4 digits of account number <u>160</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$442.49
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3.40	Nonpriority creditor's name and mailing address Osborne & Little Attn: President / C.E.O. / Responsible Agent 90 Commerce Road Stamford, CT 06902 Date(s) debt was incurred _____ Last 4 digits of account number <u>9324</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,650.00
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3.41	Nonpriority creditor's name and mailing address Park Flooring Attn: President / C.E.O. / Responsible Agent 658 Colonial Blvd. Washington, NJ 07675 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sub-contractor service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,500.00
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Debtor	Michael Felice Interiors LLC Name	Case number (if known) _____
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3.42	Nonpriority creditor's name and mailing address PayPal Attn: President / C.E.O. / Responsible Agent 3505 Silver Side Road, Suite 200 Wilmington, DE 19810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan Agreement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.43	Nonpriority creditor's name and mailing address Phillip Jeffries 180 Passaic Avenue Fairfield, NJ 07004 Date(s) debt was incurred _____ Last 4 digits of account number <u>5594</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,338.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	Nonpriority creditor's name and mailing address Pollio Plumbing Attn: President / C.E.O. / Responsible Agent P.O. Box 445 Dumont, NJ 07628 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$15,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sub-contractor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	Nonpriority creditor's name and mailing address PSE&G P.O. Box 14444 New Brunswick, NJ 08906-4444 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.46	Nonpriority creditor's name and mailing address Quicksilver Capital, LLC Attn: President / C.E.O. / Responsible Agent 181 S. Franklin Ave. Valley Stream, NY 11581 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.47	Nonpriority creditor's name and mailing address RA/Duralee LSQ Funding Group, L.C. P.O. Box 404322 Atlanta, GA 30384 Date(s) debt was incurred _____ Last 4 digits of account number <u>1432</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$460.66 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.48	Nonpriority creditor's name and mailing address Rakotex Attn: President / C.E.O. / Responsible Agent 96 Linwood Plaza, Suite 251 Fort Lee, NJ 07024 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Michael Felice Interiors LLC Name	Case number (if known) _____
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3.49	Nonpriority creditor's name and mailing address Romo Attn: President / C.E.O. / Responsible Agent 16722 West Park Circle Drive Chagrin Falls, OH 44023 Date(s) debt was incurred _____ Last 4 digits of account number <u>0337</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,578.72
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3.50	Nonpriority creditor's name and mailing address Stout Attn: President / C.E.O. / Responsible Agent P.O. Box 528 Souderton, PA 18964 Date(s) debt was incurred _____ Last 4 digits of account number <u>3858</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$603.54
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3.51	Nonpriority creditor's name and mailing address Style Library Attn: President / C.E.O. / Responsible Agent 800 Huyler Street Teterboro, NJ 07608 Date(s) debt was incurred _____ Last 4 digits of account number <u>7182</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,426.45
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3.52	Nonpriority creditor's name and mailing address The Hartford Financial Services Group Attn: President / C.E.O. / Responsible Agent P.O. Box 249 Itasca, IL 60143 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,046.30
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3.53	Nonpriority creditor's name and mailing address Thibaut Attn: President / C.E.O. / Responsible Agent P.O. Box 95000-5775 Philadelphia, PA 19195 Date(s) debt was incurred _____ Last 4 digits of account number <u>4066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,867.72
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3.54	Nonpriority creditor's name and mailing address Unique Attn: President / C.E.O. / Responsible Agent P.O. Box 1036 Champlain, NY 12919 Date(s) debt was incurred _____ Last 4 digits of account number <u>6986</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <div style="margin-top: 10px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$216.52
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Debtor	Michael Felice Interiors LLC <small>Name</small>	Case number (if known) _____
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3.55	Nonpriority creditor's name and mailing address Waste Management Attn: President / C.E.O. / Responsible Agent 1001 Fannin, Suite 4000 Houston, TX 77002 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,335.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.56	Nonpriority creditor's name and mailing address Webster Carpet Attn: President / C.E.O. / Responsible Agent P.O. Box 4403 Cherry Hill, NJ 08034 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$614.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.57	Nonpriority creditor's name and mailing address Wyckoff Associates Attn: President / C.E.O. / Responsible Agent 365 Franklin Avenue Wyckoff, NJ 07481 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$38,921.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
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3.58	Nonpriority creditor's name and mailing address Zimmer & Rohdes Attn: President / C.E.O. / Responsible Agent 30 Buxton Farm Road, Suite 110 Stamford, CT 06905 Date(s) debt was incurred _____ Last 4 digits of account number <u>6311</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,840.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	New Jersey Attorney General Office Division of Law Richard J. Hughes Justice Complex 25 Market St., PO Box 112 Trenton, NJ 08625	Line <u>2.8</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	New Jersey Division of Taxation Compliance & Enforcement - Bankruptcy 50 Barrack St., 9th Fl. PO Box 245 Trenton, NJ 08695	Line <u>2.8</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor	Michael Felice Interiors LLC <small>Name</small>	Case number (if known) _____
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?
4.3	United States Attorney General U.S. Department of Jusitce Ben Franklin Station P.O. Box 683 Washington, DC 20044	Line <u>2.8</u> <input type="checkbox"/> Not listed. Explain _____
4.4	Zwicker & Associates Attn: Peter N. Fish, Esq. 1105 Laurel Oak Road, Suite 136 Voorhees, NJ 08043	Line <u>3.3</u> <input type="checkbox"/> Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 95,665.46
5b.	+ \$ 1,425,397.80
5c.	\$ 1,521,063.26

Fill in this information to identify the case:

Debtor name **Michael Felice Interiors LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease agreement for the Paramus store location.**

State the term remaining

List the contract number of any government contract _____

**17 North Associates/Gabrellian Associate
95 NJ-17 South
Paramus, NJ 07652**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Loan agreement**

State the term remaining

List the contract number of any government contract _____

**Blue Vine
401 Warren Street
Redwood City, CA 94063**

2.3. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

**Discover Financial
Attn: President / C.E.O. / Responsible Agent
12 Reads Way
New Castle, DE 19720**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Future Receivables Sale and Purchase Agreement.**

State the term remaining

List the contract number of any government contract _____

**GTR Source / Empire
Attn: President / C.E.O. / Responsible Agent
2361 Nostrand Avenue, Suite 501
Brooklyn, NY 11210**

Debtor 1 **Michael Felice Interiors LLC**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Credit card and payroll**

State the term remaining

List the contract number of any government contract

Heartland Payment Systems
Attn: President / C.E.O. / Responsible Agent
3932 S. Boulevard Street

2.6. State what the contract or lease is for and the nature of the debtor's interest **Gallery Agreement**

State the term remaining

List the contract number of any government contract

Hunter Douglas
1 Blue Hill Plaza
Pearl River, NY 10965

2.7. State what the contract or lease is for and the nature of the debtor's interest **Loan agreement**

State the term remaining

List the contract number of any government contract

Kabbage
925 B Peachtree Street, Suite 1688
Atlanta, GA 30309

2.8. State what the contract or lease is for and the nature of the debtor's interest **Loan agreement**

State the term remaining

List the contract number of any government contract

Knight Capital
Attn: President / C.E.O. / Responsible Agent
9 East Loockerman Street, Suite 202-543
Dover, DE 19901

2.9. State what the contract or lease is for and the nature of the debtor's interest **Loan agreement**

State the term remaining

List the contract number of any government contract

On Deck Capital
Attn: President / C.E.O. / Responsible Agent
901 North Stuart Street
Arlington, VA 22203

2.10. State what the contract or lease is for and the nature of the debtor's interest **Loan agreement**

State the term remaining

List the contract number of any government contract

Par Funding / CBSG
Attn: President / C.E.O. / Responsible Agent
20 North 3rd Street
Philadelphia, PA 19106

Debtor 1 **Michael Felice Interiors LLC**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**PayPal
Attn: President / C.E.O. / Responsible Agent
3505 Silver Side Road, Suite 200
Wilmington, DE 19810**

2.12. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Lease agreement for the Wyckoff store location.

**Wyckoff Associates
365 Franklin Avenue
Wyckoff, NJ 07481**

Fill in this information to identify the case:

Debtor name **Michael Felice Interiors LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEW JERSEY**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

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Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Cecilia Guzzo**

**45 Stony Ridge Drive
Hillsdale, NJ 07642**

Hunter Douglas

☐ D _____
☒ E/F **3.27**
☐ G _____

2.2 **Cecilia Guzzo**

**45 Stony Ridge Drive
Hillsdale, NJ 07642**

American Express

☐ D _____
☒ E/F **3.3**
☐ G _____

2.3 **Cecilia Guzzo**

**45 Stony Ridge Drive
Hillsdale, NJ 07642**

**17 North
Associates/Gabrellia
n Associate**

☐ D _____
☒ E/F **3.1**
☐ G _____

2.4 **Cecilia Guzzo**

**45 Stony Ridge Drive
Hillsdale, NJ 07642**

Wyckoff Associates

☐ D _____
☒ E/F **3.57**
☐ G _____

2.5 **Cecilia Guzzo**

**45 Stony Ridge Drive
Hillsdale, NJ 07642**

**Heartland Payment
Systems**

☐ D _____
☒ E/F **3.24**
☐ G _____

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Alexa Houlis	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.1</u> <input type="checkbox"/> G _____
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2.7	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Barbara Benson	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.2</u> <input type="checkbox"/> G _____
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2.8	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Elizabeth Kane	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.3</u> <input type="checkbox"/> G _____
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2.9	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Elyce Berenzweig	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.4</u> <input type="checkbox"/> G _____
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2.10	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Janette Casse	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.5</u> <input type="checkbox"/> G _____
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2.11	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Michelle Griffith	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.6</u> <input type="checkbox"/> G _____
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2.12	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Olivia Janovic	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.7</u> <input type="checkbox"/> G _____
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2.13	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Pioneer Credit Recovery	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.8</u> <input type="checkbox"/> G _____
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Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Biehl & Biehl Inc - Attn: Achris Goldman	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
2.15	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	CK Electronics	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
2.16	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Buchanan Ingersoll Rooney	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
2.17	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Par Funding / Complete Business Solution	<input checked="" type="checkbox"/> D <u>2.7</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.18	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	Blue Vine	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.19	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	CHTD Company	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.20	Cecilia Guzzo	45 Stony Ridge Drive Hillsdale, NJ 07642	On Deck	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.21	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Hunter Douglas	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.27</u> <input type="checkbox"/> G _____

Debtor **Michael Felice Interiors LLC**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.22 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 American Express ☐ D ☒ E/F 3.2 ☐ G

2.23 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 Wyckoff Associates ☐ D ☒ E/F 3.57 ☐ G

2.24 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 17 North Associates/Gabrellia n Associate ☐ D ☒ E/F 3.1 ☐ G

2.25 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 PayPal ☐ D ☒ E/F 3.42 ☐ G

2.26 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 Heartland Payment Systems ☐ D ☒ E/F 3.24 ☐ G

2.27 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 Kabbage ☒ D 2.4 ☐ E/F ☐ G

2.28 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 Alexa Houlis ☐ D ☒ E/F 2.1 ☐ G

2.29 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642 Barbara Benson ☐ D ☒ E/F 2.2 ☐ G

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.30	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Elizabeth Kane	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.3</u> <input type="checkbox"/> G _____
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2.31	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Elyce Berenzweig	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.4</u> <input type="checkbox"/> G _____
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2.32	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Janette Casse	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.5</u> <input type="checkbox"/> G _____
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2.33	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Michelle Griffith	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.6</u> <input type="checkbox"/> G _____
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2.34	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Olivia Janovic	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.7</u> <input type="checkbox"/> G _____
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2.35	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Pioneer Credit Recovery	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.8</u> <input type="checkbox"/> G _____
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2.36	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	Biehl & Biehl Inc - Attn: Achris Goldman	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
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2.37	Michael J. Felice	45 Stony Ridge Drive Hillsdale, NJ 07642	CK Electronics	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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Debtor **Michael Felice Interiors LLC** Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.38 **Michael J. Felice** **45 Stony Ridge Drive** **Quicksilver Capital,** ☐ D _____
Hillsdale, NJ 07642 **LLC** ☒ E/F 3.46
☐ G _____

2.39 **Michael J. Felice** **45 Stony Ridge Drive** **Knight Capital** ☒ D 2.5
Hillsdale, NJ 07642 ☐ E/F _____
☐ G _____

2.40 **Michael J. Felice** **45 Stony Ridge Drive** **Par Funding /** ☒ D 2.7
Hillsdale, NJ 07642 **Complete Business** ☐ E/F _____
Solution ☐ G _____

2.41 **Michael J. Felice** **45 Stony Ridge Drive** **Blue Vine** ☒ D 2.1
Hillsdale, NJ 07642 ☐ E/F _____
☐ G _____

2.42 **Michael J. Felice** **45 Stony Ridge Drive** **CHTD Company** ☒ D 2.2
Hillsdale, NJ 07642 ☐ E/F _____
☐ G _____

2.43 **Michael J. Felice** **45 Stony Ridge Drive** **GTR Source / Empire** ☒ D 2.3
Hillsdale, NJ 07642 ☐ E/F _____
☐ G _____

2.44 **Michael J. Felice** **45 Stony Ridge Drive** **On Deck** ☒ D 2.6
Hillsdale, NJ 07642 ☐ E/F _____
☐ G _____

2.45 **Cecilia E. Guzzo** **28 Pascack Road** **Hunter Douglas** ☐ D _____
Park Ridge, NJ 07656 ☐ E/F _____
☒ G 2.6

Debtor **Michael Felice Interiors LLC** Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.46 **Cecilia Guzzo** 28 Pasack Road
Park Ridge, NJ 07656 Par Funding / CBSG ☐ D _____
☐ E/F _____
☒ G 2.10

2.47 **Cecilia Guzzo** 28 Pasack Road
Park Ridge, NJ 07656 17 North
Associates/Gabrellia
n Associate ☐ D _____
☐ E/F _____
☒ G 2.1

2.48 **Michael J Felice** 646 Avalon Gardens Drive
Nanuet, NY 10954 GTR Source / Empire ☐ D _____
☐ E/F _____
☒ G 2.4

2.49 **Michael J. Felice** 646 Avalon Gardens Drive
Nanuet, NY 10954 Hunter Douglas ☐ D _____
☐ E/F _____
☒ G 2.6

2.50 **Michael J. Felice** 646 Avalon Gardens Drive
Nanuet, NY 10954 Blue Vine ☐ D _____
☐ E/F _____
☒ G 2.2

2.51 **Michael J. Felice** 646 Avalon Grdens Drive
Nanuet, NY 10954 17 North
Associates/Gabrellia
n Associate ☐ D _____
☐ E/F _____
☒ G 2.1

2.52 **Michael J. Felice** 646 Avalon Grdens Drive
Nanuet, NY 10954 Discover Financial ☐ D _____
☐ E/F _____
☒ G 2.3

2.53 **Michael J. Felice** 646 Avalon Grdens Drive
Nanuet, NY 10954 Heartland Payment
Systems ☐ D _____
☐ E/F _____
☒ G 2.5

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.54	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	Kabbage	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.7</u>
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2.55	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	Knight Capital	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.8</u>
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2.56	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	On Deck Capital	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.9</u>
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2.57	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	Par Funding / CBSG	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.10</u>
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2.58	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	PayPal	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.11</u>
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2.59	Michael J. Felice	646 Avalon Grdens Drive Nanuet, NY 10954	Wyckoff Associates	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.12</u>
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Fill in this information to identify the case:

Debtor name Michael Felice Interiors LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

For prior year:
From **1/01/2019** to **12/31/2019**

☒ Operating a business
☐ Other _____

\$1,229,934.89

For year before that:
From **1/01/2018** to **12/31/2018**

☒ Operating a business
☐ Other _____

\$1,115,990.00

For the fiscal year:
From **1/01/2017** to **12/31/2017**

☒ Operating a business
☐ Other _____

\$815,126.00

For the fiscal year:
From **1/01/2016** to **12/31/2016**

☒ Operating a business
☐ Other _____

\$494,386.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

☒ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
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4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. 17 North Associates/Gabrellian Associate 95 NJ-17 South Paramus, NJ 07652	Ordinary course of business	Unknown	Landlord
4.2. Blue Vine Attn: President / C.E.O. / Responsible Agent 401 Warren Street Redwood City, CA 94063	Ordinary course of business	Unknown	
4.3. CHTD Company P.O Box 2576 Springfield, IL 62708	Ordinary course of business	Unknown	
4.4. Wyckoff Associates Attn: President / C.E.O. / Responsible Agent 365 Franklin Avenue Wyckoff, NJ 07481	Ordinary course of business	Unknown	Landlord
4.5. The Hartford Financial Services Group Attn: President / C.E.O. / Responsible Agent P.O. Box 249 Itasca, IL 60143	Ordinary course of business	Unknown	
4.6. GTR Source / Empire Attn: President / C.E.O. / Responsible Agent 2361 Nostrand Avenue, Suite 501 Brooklyn, NY 11210	Ordinary course of business	Unknown	
4.7. Heartland Payment Systems Attn: President / C.E.O. / Responsible Agent 3932 S. Boulevard Street Edmond, OK 73003	Ordinary course of business	Unknown	
4.8. Hunter Douglas Attn: President / C.E.O. / Responsible Agent 1 Blue Hill Plaza, 21st Fl. Pearl River, NY 10965	Ordinary course of business	Unknown	

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.9. Kabbage Attn: President / C.E.O. / Responsible Agent 925 B Peachtree Street, Suite 1688 Atlanta, GA 30309	Ordinary course of business	Unknown	
4.10 Knight Capital Attn: President / C.E.O. / Responsible Agent 9 East Loockerman Street, Suite 202-543 Dover, DE 19901	Ordinary course of business	Unknown	
4.11 Par Funding / Complete Business Solution Attn: President / C.E.O. / Responsible Agent 2000 PGA Blvd., Suite 440 North Palm Beach, FL 33408	Ordinary course of business	Unknown	
4.12 Influx Capital LLC Attn: President / C.E.O. / Responsible Agent 32 Court Street # 205 Brooklyn, NY 11201	Ordinary course of business	Unknown	
4.13 On Deck Attn: President / C.E.O. / Responsible Agent 901 North Stuart Street Arlington, VA 22203	Ordinary course of business	Unknown	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
Par Funding/Complete Business Solution Attn: President / C.E.O. / Responsible Agent 2000 PGA Blvd., Suite 440 Palm Beach Gardens, FL 33408	Frozen TD Bank and Bank of America accounts		\$3,474.42

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Complete Business Solutions Group, Inc. vs. Michael Felice Interiors LLC D/B/A, Michael Felice Interiors and Michael Felice and Cecilia Guzzo 190802827	Contract	Philadelphia County Court of Common Plea 1400 John F. Kennedy Blvd. Philadelphia, PA 19107	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2.	American Express National Bank vs. Cecilia Guzzo and Michael Felice Interiors Limited Liability Company BER-L-006656-19	Civil	Superior Court of New Jersey Bergen County 10 Main Street Hackensack, NJ 07601	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
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Debtor **Michael Felice Interiors LLC**

Case number (if known)

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Scura, Wigfield, Heyer, Stevens & Cammarota, LLP 1599 Hamburg Turnpike Wayne, NJ 07470		01/23/2020	\$5,000.00
	Email or website address			
	Who made the payment, if not debtor? William & Marlene Koenig			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Names, Credit Card #'s.

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
-----------------------	-------------------------------------	--

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Maurice Ferraro - Accountant 666 Godwin Avenue, Suite 210 Midland Park, NJ 07432	12/13/2019, 05/16/2018, 10/18/2017

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

Debtor **Michael Felice Interiors LLC**

Case number (if known) _____

☒ None**Name and address****If any books of account and records are unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Michael J. Felice	646 Avalon Gardens Drive Nanuet, NY 10954	Member	50
Cecilia Guzzo	28 Pasack Road Park Ridge, NJ 07656	Member	50

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Michael J. Felice 45 Stony Ridge Drive Hillsdale, NJ 07642	166,934.59	2019	
Relationship to debtor Member			

Debtor **Michael Felice Interiors LLC**

Case number (if known)

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.2	Cecilia Guzzo 45 Stony Ridge Drive Hillsdale, NJ 07642	166,934.59	2019	
	Relationship to debtor Member			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 30, 2020**

/s/ Michael J. Felice

Signature of individual signing on behalf of the debtor

Michael J. Felice

Printed name

Position or relationship to debtor **Member**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
District of New Jersey**

In re **Michael Felice Interiors LLC**

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	5,000.00
Prior to the filing of this statement I have received	\$	5,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify): **Debtor has retained the Law Firm of Scura, Wigfield, Heyer, Stevens & Cammorota, LLP on an hourly basis.**

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 30, 2020

Date

/s/ David L. Stevens

David L. Stevens 034422007 NJ

Signature of Attorney

Scura, Wigfield, Heyer, Stevens & Cammarota, LLP

1599 Hamburg Turnpike

Wayne, NJ 07470

973-696-8391

ecfbkfilings@scuramealey.com

Name of law firm

**United States Bankruptcy Court
District of New Jersey**

In re **Michael Felice Interiors LLC**

Debtor(s)

Case No.
Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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-NONE-

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Member** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **January 30, 2020**

Signature **/s/ Michael J. Felice**
Michael J. Felice

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
District of New Jersey**

In re **Michael Felice Interiors LLC**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **January 30, 2020**

/s/ Michael J. Felice

Michael J. Felice/Member

Signer/Title

17 North Associates/Gabrellian Associate
Attn: President / C.E.O. / Responsible
Agent
95 NJ-17 South
Paramus, NJ 07652

17 North Associates/Gabrellian Associate
95 NJ-17 South
Paramus, NJ 07652

Alexa Houlis
37 Fremont Avenue
Nanuet, NY 10954

American Express
Attn: President / C.E.O. / Responsible
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200 Vesey Street
New York, NY 10285-3106

American Express
Attn: President / C.E.O. / Responsible
Agent
200 Vesey Street
New York, NY 10285-3106

Bank Of America
Attn: President / C.E.O. / Responsible
Agent
P.O. Box 15019
Wilmington, DE 19886

Bank Of America
Attn: President / C.E.O. / Responsible
Agent
P.O. Box 15796
Wilmington, DE 19886

Barbara Benson
623 Pawnee Lane
Franklin Lakes, NJ 07417

Biehl & Biehl Inc - Attn: Achris Goldman
c/o Norh Jersey Media
325 E. Fullerton Avenue
Carol Stream, IL 60188

Blue Vine
Attn: President / C.E.O. / Responsible
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401 Warren Street
Redwood City, CA 94063

Blue Vine
401 Warren Street
Redwood City, CA 94063

Buchanan Ingersoll Rooney
Attn: Michael D. Hall
c/o Install Focus
550 Broad Street, Suite 810
Newark, NJ 07102

C T Corporation System
330 N Brand Blvd, Suite 700
Attn: SPRS
Glendale, CA 91203

Capital One
Attn: President / C.E.O. / Responsible
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P.O. Box 6492
Carol Stream, IL 60197

Carole Fabrics
Attn: President / C.E.O. / Responsible
Agent
P.O. Box 1436
Augusta, GA 30903

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Park Ridge, NJ 07656

Cecilia Guzzo
45 Stony Ridge Drive
Hillsdale, NJ 07642

Cecilia Guzzo
45 Stony Ridge Drive
Hillsdale, NJ 07642

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Cecilia Guzzo
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Springfield, IL 62708

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Wyckoff, NJ 07481

CK Electronics
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10 Storrs Court
Mahwah, NJ 07430

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Philadelphia, PA 19106

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Philadelphia, PA 19106

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New York, NY 10013

Currey & Company
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Agent
50 Best Friend Road
Atlanta, GA 30340

Design NJ
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Agent
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Red Bank, NJ 07701

DexYP
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Dallas, TX 75261

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New Castle, DE 19720

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12 Reads Way
New Castle, DE 19720

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First Data Global Leasing
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P.O. Box 173845
Denver, CO 80217

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Hanson Homes
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Park Ridge, NJ 07656

Heartland Payment Systems
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3932 S. Boulevard Street
Edmond, OK 73003

Heartland Payment Systems
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Agent
3932 S. Boulevard Street

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Martinsville, VA 24112

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New York, NY 10022

Hunter Douglas
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Pearl River, NY 10965

Hunter Douglas
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Pearl River, NY 10965

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Marlene & William Koenig
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Marshall Stokols

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Romo
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Sirlin Lesser & Benson, P.C.
Attn: Jon C. Sirlin, Esq.
c/o TD Bank
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Style Library
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Agent
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Teterboro, NJ 07608

The Hartford Financial Services Group
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Champlain, NY 12919

United States Attorney General
U.S. Department of Justice
Ben Franklin Station
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Washington, DC 20044

Waste Management
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Webster Carpet
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Cherry Hill, NJ 08034

Wyckoff Associates
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Agent
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Wyckoff, NJ 07481

Wyckoff Associates
365 Franklin Avenue
Wyckoff, NJ 07481

Zimmer & Rohdes
Attn: President / C.E.O. / Responsible
Agent
30 Buxton Farm Road, Suite 110
Stamford, CT 06905

Zwicker & Associates
Attn: Peter N. Fish, Esq.
1105 Laurel Oak Road, Suite 136
Voorhees, NJ 08043

**United States Bankruptcy Court
District of New Jersey**

In re **Michael Felice Interiors LLC**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Michael Felice Interiors LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

January 30, 2020

Date

/s/ David L. Stevens

David L. Stevens 034422007 NJ

Signature of Attorney or Litigant

Counsel for **Michael Felice Interiors LLC**

Scura, Wigfield, Heyer, Stevens & Cammarota, LLP

1599 Hamburg Turnpike

Wayne, NJ 07470

973-696-8391

ecfbkfilings@scuramealey.com